FEC

STATEMENT OF

FORM 1	ORGANIZ	ATION			
1 Olliwi 1	(See instructions)			Office use only	
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5		
LENNOX EMPI	LOYEE ADVOCACY PROGRAM	LENNOX INTERNATION	AL INC	11111111	
ADDRESS (number and s	P O BOX 799900				
(Check if address is changed)					
	DALLAS			75379 _ _	
		CITY▲	STATE▲	ZIP CODE 📥	
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e				
(Check if address is changed)	david.dorsett@lenr	noxintl.com			
COMMITTEE'S WEB I	PAGE ADDRESS (URL)				
(Check if address is changed)	1				
2. DATE M M	/ D D / Y Y Y Y				
2. DATE 0.9	14 2011				
3. FEC IDENTIFICA	TION NUMBER	C C00116996			
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A	N)		
I certify that I have examin	ned this Statement and to the best of my kn	nowledge and belief it is true, corn	ect and complete		
	David Davad				
Type or Print Name of	Treasurer David Dorsett				
Signature of Treasurer	Electronically Filed by David Do	prsett	Date 09	/ 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
NOTE: Submission of fals	se, erroneous, or incomplete information m ANY CHANGE IN INFORM	ay subject the person signing this	•		
Office		For further informa			
Use Only		Federal Election Cor Toll Free 800-424-9	mmission	FEC FORM 1 (Revised 02/2009)	